Pace nomination form



Please complete both sides of this form to let the Pace Trustees, and (if applicable) the Trustee of one of the closed pension schemes*, know who you would like to receive benefits in the event of your death. For the purpose of this form, the Pace Trustees and the Trustee of your closed pension scheme* are referred to as 'the Trustees'.

Please complete all sections of this form.

Section 1: Who would you like to nominate to receive benefits?

You can nominate any person(s) you wish (including charities or clubs) to receive benefits (please use **BLOCK CAPITALS**).

Name	Address	Relationship to you (optional)	Proportion of benefit (e.g. 50%)				
1							
2							
3							
		1	100%				

If you nominate more than one person, the total proportions must equal 100%. If you'd like to nominate more than three people to receive benefits, please continue on a separate sheet. The Trustees cannot advise you on the distribution of your death benefits. You should consult your own financial adviser if you're in any doubt as to how to use this form and what tax, if any, may be payable on your death.

Please note: This nomination form will replace any previous nomination form you may have completed in respect of Pace or any closed pension scheme you were previously a member of.

Please turn over



Section 2: Your details and declaration

Place use RI OCK CAPITALS

Ticase ase beack on Tines	
Surname	First name(s)
Title Mr / Mrs / Miss / Ms (delete as appropriate)	Date of birth
National insurance number	
Address	
F	Postcode

I understand that this is an expression of my wishes, and although it will be taken into account, it is not binding on the Trustees. I confirm that, to the best of my knowledge, all the information on this form is correct and I understand that I can submit an updated form in writing at any time.

Data Protection

I accept that the Trustees, their advisers and administrators will need to process certain data about me (and my nominated beneficiaries) and that this may include items categorised under the Data Protection Act 1998 as 'sensitive personal data'. I understand that this data may be needed to calculate and pay benefits, for statistical purposes, for reference purposes and to administer Pace and my closed scheme*. I accept that under the provisions of the Data Protection Act 1998, I am required to obtain the consent of my nominated beneficiaries to the processing of their 'sensitive personal data' for such purposes.

Signatu	re							
Date		/		/				

If you were a member of one of the closed pension schemes*, please return your completed form to: The Co-op Pensions Department, Department 10406, 1 Angel Square, Manchester M60 0AG

If you are a member of Pace DC only, please return your completed form to: Legal & General, Trustee Services Team, City Park, The Droveway, Hove BN3 7PY

^{*} A closed scheme may be one of the following:

[•] Pace Complete • The Brixham Co-operative Society Limited Employees' Superannuation Fund • The Leeds Co-operative Society Limited Employees' Pension Fund • The Lothian and Borders Co-operative Society Limited Employees' Pension Fund • The Plymouth & South West Co-operative Society Limited Employees' Pension Fund • The Sheffield Co-operative Society Limited Employees' Pension Fund • The Somerfield Pension Scheme • The United Norwest Co-operatives Employees' Pension Fund • The Yorkshire Co-operatives Limited Employees' Superannuation Fund.